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01/22/02

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PTO/SB/05 (03-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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UTILITY
PATENT APPLICATION
TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.

First Inventor T. Edward Black

Title A perdurable chassis ...

Express Mail Label No.

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. Applicant claims small entity status.
See 37 CFR 1.27.
3. Specification [Total Pages 5]
(Preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. Drawing(s) (35 U.S.C. 113) [Total Sheets 1]
5. Oath or Declaration [Total Pages]
- a. Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
- b. (for continuation/divisional with Box 18 completed)
- i. **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. Application Data Sheet. See 37 CFR 1.76

ADDRESS TO: Assistant Commissioner for Patent:
Box Patent Application
Washington, DC 20231

7. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. CD-ROM or CD-R (2 copies); or
 - ii. paper
 - c. Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. Assignment Papers (cover sheet & document(s))
10. 37 CFR 3.73(b) Statement Power of Attorney (when there is an assignee)
11. English Translation Document (if applicable)
12. Information Disclosure Statement (IDS)/PTO-1449 Copies of IDS Citations
13. Preliminary Amendment
14. Return Receipt Postcard (MPEP 503)
(Should be specifically itemized)
15. Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
17. Other:

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation Divisional Continuation-in-part (CIP) of prior application No.: _____ / _____

Prior application information: Examiner _____ Group Art Unit: _____

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

19. CORRESPONDENCE ADDRESS

Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below

| | | | | | |
|---------|------------------|-----------|--------------------|----------|-------|
| Name | T. Edward Black | | | | |
| Address | 1127 Miller Lane | | | | |
| City | Buffalo Grove | State | IL | Zip Code | 60089 |
| Country | USA | Telephone | (847) 259 5747 Fax | | |

| | | | |
|-------------------|------------------------|-----------------------------------|-------------|
| Name (Print/Type) | T. Edward Black | Registration No. (Attorney/Agent) | |
| Signature | <i>T. Edward Black</i> | | Date 1/3/02 |

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

JC903 SJC 10/051798 01/22/02

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FEE TRANSMITTAL

for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$) \$ 355.00

Complete if Known

| | |
|----------------------|-----------------|
| Application Number | |
| Filing Date | 1/3/02 |
| First Named Inventor | T. Edward Black |
| Examiner Name | |
| Group Art Unit | |
| Attorney Docket No. | |

METHOD OF PAYMENT

1. The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

| | |
|------------------------|--|
| Deposit Account Number | |
| Deposit Account Name | |

Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

Applicant claims small entity status. See 37 CFR 1.27

2. Payment Enclosed:

Check Credit card Money Order Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Small Entity
Fee Code (\$) Fee Code (\$)

| | | | | |
|-----|-----|-----|-----|------------------------|
| 101 | 710 | 201 | 355 | Utility filing fee |
| 106 | 320 | 206 | 160 | Design filing fee |
| 107 | 490 | 207 | 245 | Plant filing fee |
| 108 | 710 | 208 | 355 | Reissue filing fee |
| 114 | 150 | 214 | 75 | Provisional filing fee |

SUBTOTAL (1) (\$) 355

2. EXTRA CLAIM FEES

| | | | | | | | |
|--------------------|--------------------------|---------|--------------------------|---|--------------------------|---|--------------------------|
| Total Claims | <input type="checkbox"/> | -20** = | <input type="checkbox"/> | X | <input type="checkbox"/> | = | <input type="checkbox"/> |
| Independent Claims | <input type="checkbox"/> | - 3** = | <input type="checkbox"/> | X | <input type="checkbox"/> | = | <input type="checkbox"/> |
| Multiple Dependent | <input type="checkbox"/> | | <input type="checkbox"/> | | <input type="checkbox"/> | = | <input type="checkbox"/> |

Large Entity Small Entity
Fee Code (\$) Fee Code (\$)

| | | | | |
|-----|-----|-----|-----|--|
| 103 | 18 | 203 | 9 | Claims in excess of 20 |
| 102 | 80 | 202 | 40 | Independent claims in excess of 3 |
| 104 | 270 | 204 | 135 | Multiple dependent claim, if not paid |
| 109 | 80 | 209 | 40 | ** Reissue independent claims over original patent |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent |

SUBTOTAL (2) (\$)

*or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

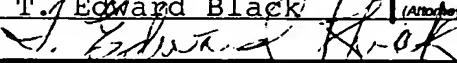
| Fee Code | Fee (\$) | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|----------|----------|--|--------------------------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | <input type="checkbox"/> |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | <input type="checkbox"/> |
| 139 | 130 | 139 | 130 | Non-English specification | <input type="checkbox"/> |
| 147 | 2,520 | 147 | 2,520 | For filing a request for ex parte reexamination | <input type="checkbox"/> |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | <input type="checkbox"/> |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | <input type="checkbox"/> |
| 115 | 110 | 215 | 55 | Extension for reply within first month | <input type="checkbox"/> |
| 116 | 390 | 216 | 195 | Extension for reply within second month | <input type="checkbox"/> |
| 117 | 890 | 217 | 445 | Extension for reply within third month | <input type="checkbox"/> |
| 118 | 1,390 | 218 | 695 | Extension for reply within fourth month | <input type="checkbox"/> |
| 128 | 1,890 | 228 | 945 | Extension for reply within fifth month | <input type="checkbox"/> |
| 119 | 310 | 219 | 155 | Notice of Appeal | <input type="checkbox"/> |
| 120 | 310 | 220 | 155 | Filing a brief in support of an appeal | <input type="checkbox"/> |
| 121 | 270 | 221 | 135 | Request for oral hearing | <input type="checkbox"/> |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | <input type="checkbox"/> |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | <input type="checkbox"/> |
| 141 | 1,240 | 241 | 620 | Petition to revive - unintentional | <input type="checkbox"/> |
| 142 | 1,240 | 242 | 620 | Utility issue fee (or reissue) | <input type="checkbox"/> |
| 143 | 440 | 243 | 220 | Design issue fee | <input type="checkbox"/> |
| 144 | 600 | 244 | 300 | Plant issue fee | <input type="checkbox"/> |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | <input type="checkbox"/> |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | <input type="checkbox"/> |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | <input type="checkbox"/> |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | <input type="checkbox"/> |
| 146 | 710 | 246 | 355 | Filing a submission after final rejection (37 CFR § 1.129(a)) | <input type="checkbox"/> |
| 149 | 710 | 249 | 355 | For each additional invention to be examined (37 CFR § 1.129(b)) | <input type="checkbox"/> |
| 179 | 710 | 279 | 355 | Request for Continued Examination (RCE) | <input type="checkbox"/> |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | <input type="checkbox"/> |

Other fee (specify) _____ SUBTOTAL (3) (\$)

*Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)

SUBMITTED BY

Complete if applicable

| | | | | | |
|-------------------|---|--------------------------------------|--|-----------|----------------|
| Name (Print/Type) | T. Edward Black | Registration No. (Attorney/Agent) | | Telephone | (847) 259 5747 |
| Signature |  | | | Date | 1/3/02 |

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